

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. **10824568**

FILING DATE **4-15-06**

APPLICANT(S)

CLAIMS

| | AD FILIO | | ADDITIONAL ASSIGNMENT | | ADDITIONAL ASSIGNMENT | |
|--------------|----------|-----|-----------------------|-----|-----------------------|-----|
| | CID | DEP | CID | DEP | CID | DEP |
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| TOTAL IND. | 3 | | | | | |
| TOTAL DEP. | 37 | | | | | |
| TOTAL CLAIMS | 40 | | | | | |

| | AD FILIO | | ADDITIONAL ASSIGNMENT | | ADDITIONAL ASSIGNMENT | |
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| TOTAL IND. | | | | | | |
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| TOTAL CLAIMS | | | | | | |